## FORM D

MOTION OF SALE OF SECURITIES Persont to regulation d, SECTION 4(6), AND/OR ®M³Ūmìtèd offering exemption

hours per resp	onse 16.00
SEC US	E ONLY
Prefix	Sertal
DATER	ECEIVED

Estimated average burden

Name of Offering (Deheck if this to an amendment and name has changed, and indicate change.)  Convertible Note Die December 30, 2008	10530
	ULOE
Type of Filing: Q New Filing Q Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  EastShip. Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (In 1700 Market Street, Suite 2720 Philadelphia, PA 19103 (215) 574-1770	actuding Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (In different from Executive Offices)	ncluding Area Code)
Commercial cargo vessel design and operation. BEST AVAILABLE COPY	PROCESSED JUL 2 6 2006
Type of Business Organization  El corporation  U limited partnership, already formed  U other (please specify limited partnership, to be formed	THOMSON "FINANCIAL
Actual or Estimated Date of Incorporation or Organization:    Month Year     Actual   Estimated Date of Incorporation or Organization:   Estimated Date of Incorporation or Organization:   (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	ited
GENERAL INSTRUCTIONS	•
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Securities, or 15 U.S.C. 77d(6).  When To File: A notice must be slied no later than 15 days after the first sale of securities in the offering. A notice must be slied no later than 15 days after the first sale of securities in the offering.	•
the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the freezived at that address: after the date on which it is due, on the date it was mailed by United States registered or commission.	IC SORIED Pries Area are
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed signed must be photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only report the nating, any changes thereto, the information requested in Part C, and any material changes from the information p A and B. Part E and the Appendix need not be filed with the SEC.	ime of the issuer and otter- reviously supplied in Parts
Filing Fee: There is no federal filing fee.	

Fallure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state

Platential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid CINA control number.

law. The Appendix to the notice constitutes a part of this notice and must be completed.

SEC 1972 (2-97) 1 of 8



## **四** Director ☐ Beneficial Owner W Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Chambers, Kathryn Riepe Business or Residence Address (Number and Street, City, State, Zip Code) Philadelphia, PA 19103 1700 Market Street, Suite 2720 ☐ General and/or Promoter . Beneficial Owner : D Executive Officer Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Giles, David L. Business or Residence Address (Number and Street, City, State, Zip Codé) 1700 Market Street, Suite 2720 Philadelphia, PA 19103 Executive Officer Director ☐ General and/or Check Box(es) that Apply: □ Beneficial Owner ☐ Promoter Managing Partner Full Name (Last name first, if individual) Colgan, Dennis (Number and Street, City, State, Zip Code) Business or Residence Address Philadelphia, PA 19103 1700 Market Street, Suite 2720 ☐.General and/or □ Director D Beneficial Owner □ Executive Officer Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) Riverfront Development Corporation Business or Residence Address (Number and Street, City, State, Zip Code) 701 North Broadway, Glouchester City, NJ 08030 ☐ General and/or ☐ Director ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Dunn, David E. Business or Residence Address (Number and Street, City, State, Zip Code) Palton Boggs LLP. 2550 M Street; NW, Washington, DC 20037

			Ans	wer also i	a <b>Appen</b> di	x, Column	2, if Min	g under U	LOE.			
2. Wha	t is the mir	yai awali	estment th	at will be	accepted (	rom any i	ndividual?	••••••	• ••••••	******	• • • • • • • •	: \$10,000
		•	. '	<b>,</b>								
	the offeri											. 03 🖸
sion : to be list ti	r the inform or similar re Histed is as he name of caler, you r	emuneration associate the broke	on for solic d person o r or dealer	itation of p r agent of r. If more	purchasers a broker o than five (	in connect or dealer re 5) persons	ion with sa gistered wi to be liste	les of secur ith the SEC d are assoc	ities in the cand/or v	offering.	a person	1
Full Name	(Last nam	e first, if	individual	)			<u>-</u>	<del></del>				
N/A												
	r Residenc	e Address	(Number	and Street.	City, Sta	te, Zip Co	ide)					
	*										•	
Name of	Associated	Broker or	Dealer	<del></del>			· <del>·</del>			<del></del>	<del></del> -	
						<del></del>		·				
States in '	Which Pers	on Listed	Has Solici	ted or Inte	ends to So	licit Purch	asers	· ·				
(Check	"All State:	i, ot cpec	k individu	al States) .		.,		••••••	• • • • • • • • •	• • • • • • • • •		☐ All States
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[RI]	[SC]	[SD]	[NI]	[XX]	(UT)	[YT]	[VA]	[WA]	[WV]	[MI].	[WY]	[PR]
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N/A			•		•				•			
	or Residence	e Address	(Number	and Street	. City, Sta	ite, Zip Co	ode)					
3 - 5			•		•	•		•				
Name of	Associated	Broker o	r Dealer			-	<del></del>					<del></del>
f-								•				
States in	Which Per	son Listed	Has Solic	ited or Int	ends to Se	olicit Purc	hasers					<del></del>
(Check	"All State	s" or che	ck individu	ial States)								All States
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	or Residen	as Addes	· Alumba	and Crea	City St	ate Zin C	'oda'					
Df731622	Of Vezideli	ice Madres	s (iammoei	and Succ	. City, St	ate, ap c	2020)					•
Name of	Associated	Broker o	or Dealer			<del></del>	<del></del> -					
		•										
States in	Which Per	rson Liste	d Has Soli	cited or In	itends to S	olicit Purc	chasers					
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[MT]	(NE)	[NV]	[HK]	[14]	[MM]	[NY]			[OH]	(OK)	(OR) (WY)	4001

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

L. OFFERING PRICE, NUMBER OF INVESTURE, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security

Debt

Equity

L. OFFERING PROCEEDS

Aggregate
Offering Price

	Type of Security	Aggregate Offering Price	Amount Afready Sold
	Debt	\$	<u>s</u>
	Equity	\$	S
	Common D Preferred	:	. ,
	Convertible Securities (including warrants)		\$ 60,000
	Partnership Interests	5	<u> </u>
	Other (Specify)	\$	\$
	Total	\$_60,000	60,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
. (	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	§ 60,000
	Non-accredited Investors	•	. \$
	Total (for filings under Rule 504 only)		. s
	Answer also in Appendix, Column 4, if filing under ULOE.	·	
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the Issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount Sold
	Type of offering	Security	5014
	Rule 505		
	Regulation A		
	Total		. <del>}</del>
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		) \$
	Printing and Engraving Costs		1,000
	Legal Fees		
	Accounting Fees		) S
	Engineering Fees	c	\$
	Sales Commissions (specify finders' fees separately)		) \$
	Other Expenses (identify)	_	59,000
	Total		3 \$: 59,000

mane and check the box to the left of the estimate						
adjusted gross proceeds to the issuer set forth	h in response to Pari	t C - Question 4.b	bove.	•		
	• • • • • • • • • • • • • • • • • • • •			Payment Officer		
		•		Director		Payment
				· Affilia		Other
Salaries and fees		• • • • • • • • • • • • • • • • • • • •	. 'Zi s	•	<b>1</b> 57	59,000
Purchase of real estate	•				<u>-</u> -	
•	•					2
Purchase, rental or leasing and installation of	machinery and equi	•				
Construction or leasing of plant buildings an	d facilities	• • • • • • • • • • • • • • • • • • • •	<b>D</b> 5			<u>s</u>
Acquisition of other businesses (including the	value of terminies i				· · · · ·	;
offering that may be used in exchange for th	e assets or securities	of another	•	•	•	
leituer pursuant to a merger)	•••••••		. 🗆 1	<del>:</del>		S
Repayment of indebtedness	*******		. 🗖 \$			\$
Working capital			П.		. 27	.e
		the state of the s				,
Other (specify):	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	- 🗅 2	<del></del>		<del>, Ş</del>
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	·		. 🗆 s	<u> </u>		<b>S</b>
Column Totals					-	\$ 59,00
Total Payments Listed (column totals added)	D. FEDERAL SIG	NATURE	•	<u> </u>		000 .
Total Payments Listed (column totals added)	D. FEDERAL SIG	NATURE	n. If t	his notice	k (Hed ar	ider Rule S
Total Payments Listed (column totals added)  ruer has duly caused this notice to be signed bing signature constitutes an undertaking by the	D. FEDERAL SIG	NATURE  uly authorized personal the U.S. Securities	m. If t	his notice	k filed u	nder Rule St
Total Payments Listed (column totals added)  fuer has duly caused this notice to be signed bing signature constitutes an undertaking by the of its staff, the information furnished by the	D. FEDERAL SIG y the undersigned du issuer to furnish to issuer to any non-acc	NATURE  uly authorized personal the U.S. Securities	m. If t	his notice	is (Iled az omraission aph (b)(Z)	nder Rule St
Total Payments Listed (column totals added)  ouer has duly caused this notice to be signed b ing signature constitutes an undertaking by the if its staff, the information furnished by the  (Print or Type)	D. FEDERAL SIG	NATURE  Ly authorized personal the U.S. Securities credited investor purely and the credited invest	m. If t	his notice	is (lied an commission aph (b)(2)	nder Rule St
Total Payments Listed (column totals added)  ouer has duly caused this notice to be signed by ing signature constitutes an undertaking by the of its staff, the information furnished by the (Print or Type)  FastShip, Inc.	D. FEDERAL SIG by the undersigned du issuer to furnish to issuer to any non-act Signature	NATURE  Let authorized personal the U.S. Securities credited investor purely the security of t	m. If t	his notice	is (lied an commission aph (b)(2)	nder Ruie St L. upon writ of Ruie 50
Total Payments Listed (column totals added)  ouer has duly caused this notice to be signed by ing signature constitutes an undertaking by the of its staff, the information furnished by the (Print or Type)  FastShip, Inc.	D. FEDERAL SIG y the undersigned du issuer to furnish to issuer to any non-act	NATURE  Let authorized personal the U.S. Securities credited investor purely the security of t	m. If t	his notice	is (lied an commission aph (b)(2)	nder Ruie St L. upon writ of Ruie 50
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1. It any party described in 17 CFR 230.252(c), (Q), (e) or (I) presently subject to any of the disqualification provisions. Yes of such role? ....

See Appendix, Column.5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filled, a sotice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersioned leaves hereby undertakes to furnish to the state administrators, upon written request, information furnished by the boxer to offeress.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer daining the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) FastShip, Inc.	Signature Stubal Mahal	Date 6/7/2006
Name (Print or Type)	Title (Print or Type)	
Michael T. Nichols	Assistant Secretary	

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice o Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or prints बंद्राह्मपाच्ड.

	investor	to sell ceredited in State -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		amount pur	Type of investor and ount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item!)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL		·					<del></del>		-110		
AK		·						·			
AZ											
AR					•						
CA			4.								
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MN			<u> </u>		<u> </u>		<u> </u>				
MS	<b></b>		<u> </u>		<del> </del>		<u> </u>	<u> </u>			
МО			1	<u> </u>	1	<u> </u>		<u> </u>			

1		2 3 4 4 7 Type of security							5 Disqualification under State ULOB	
	to non-a	to sell ccredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	(Part E Yes	No	
МТ										
NE			•							
NV							<del></del>			
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· 你是我们,只然不是是你没有我们就是我的PENDIES · 你可以不知识的我们就是我们是我们是我们